CMS Manual System Pub 100-04 Medicare Claims Processing

Transmittal 558

Department of Health & Human Services
Center for Medicare and &
Medicaid Services
Date: MAY 6, 2005

Change Request 3870

SUBJECT: July Update to the 2005 Medicare Physician Fee Schedule Database

I. SUMMARY OF CHANGES: Payment files were issued to carriers based upon the November 15, 2004, Medicare physician fee schedule final rule. This change request amends those payment files. Also included are two new G codes related to a National Coverage Determination for smoking cessation, which was effective March 22, 2005, and practice expense values for CPT codes 97810, 97811, 97813, and 97814.

NEW/REVISED MATERIAL:

EFFECTIVE DATE: January 1, 2005

IMPLEMENTATION DATE: July 5, 2005

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE
N/A	

III. FUNDING:

No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2005 operating budgets.

IV. ATTACHMENTS:

Recurring Update Notification

*Unless otherwise specified, the effective date is the date of service.

Attachment – Recurring Update Notification

Pub. 100-04 | Transmittal: 558 | Date: May 6, 2005 | Change Request 3870

SUBJECT: July Update to the 2005 Medicare Physician Fee Schedule Database

I. GENERAL INFORMATION

A. Background: Payment files were issued to carriers based upon the November 15, 2004, Medicare physician fee schedule final rule. This change request (CR) amends those payment files. Also included are two new G codes related to a National Coverage Determination for smoking cessation, which was effective March 22, 2005, and practice expense values for CPT codes 97810, 97811, 97813, and 97814.

NOTE: CPT codes 97810, 97811, 97813, and 97814 are non-covered under the Medicare physician fee schedule. Values for these codes were established as a courtesy to the general public. These codes will remain non-covered even though relative value units have been established. These changes do not apply to carriers and no system changes are necessary.

B. Policy: Section 1848(c)(4) of the Social Security Act authorizes the Secretary to establish ancillary policies necessary to implement relative values for physicians' services.

II. BUSINESS REQUIREMENTS

[&]quot;Should" denotes an optional requirement

Requirement	Requirements	Re	espo	nsi	bilit	ty ("	X" :	indi	icate	es the
Number		columns that apply)								
		FI	R H H I	C a r r i e r	D M E R C		med Sintain M C S		C	Other
3870.1	Contractors shall, in accordance with Pub. 100-4, chapter 23, section 30.1, give providers 30 days notice before implementing the revised payment amounts identified in Attachment 1. Unless otherwise stated in this transmittal, changes will be retroactive to January 1, 2005.			X						
3870.2	Contractors need not search their files to either retract payment for claims already paid or to retroactively pay claims. However, contractors shall adjust claims brought to their attention.	X		X						

[&]quot;Shall" denotes a mandatory requirement

Requirement	Requirements	Responsibility ("X" indicates the columns that apply)		es the					
Number		F I	R H H I	C a r r i e r	D M E R C	Sha	red Sintain M C S	С	Other
3870.3	Contractors shall retrieve the revised payment files, as identified in Attachment 2, from the Centers for Medicare & Medicaid Services Mainframe Telecommunications System. These files will be available on May 11, 2005. NOTE: Carriers shall retrieve File A, File B, and the Purchased Diagnostic File. File A contains changes that are effective January 1, 2005 and two new G codes (G0375 & G0376) related to a National Coverage Determination (NCD) for smoking cessation. File B contains changes effective after January 1, 2005.	X		X					
3870.4	Notification of successful receipt shall be sent via e-mail to CMS/Mary Anne Stevenson (mary.stevenson@cms.hhs.gov) stating the name of the file received and the entity for which it was received (e.g., carrier/fiscal intermediary name and number).	X		X					

III. PROVIDER EDUCATION

Requirement	Requirements	Responsibility ("X" indicates the		es the						
Number		columns that apply)								
		F	R H H I	C a r r	D M E R C		red S ntair M C S	•	C W F	Other
3870.5	A provider education article related to this instruction will be available at www.cms.hhs.gov/medlearn/matters shortly after the CR is released. You will receive notification of the article release via the established "medlearn matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listsery message within	X		e r X		S				

-	Requirements				es the					
Number		columns that apply)								
		F	R	C	D			Syste	m	Other
		I	Н	a	M	Mai	ntaii	tainers		
			H I	r r i e r	E R C	F I S	M C S	V M S	C W F	
	one week of the availability of the provider education article. In addition, the provider education article shall be included in your next regularly scheduled bulletin and incorporated into any educational events on this topic. Contractors are free to supplement Medlearn Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.									

IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: N/A

D. Contractor Financial Reporting / Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

V. SCHEDULE, CONTACTS, AND FUNDING

Effective Date*: January 1, 2005	Medicare contractors shall
Implementation Date: July 5, 2005	implement these instructions
	within their current operating
Pre-Implementation Contact(s): Gaysha Brooks,	budgets.

(410) 786-9649, gbrooks@cms.hhs.gov	
Post-Implementation Contact(s): Regional office	

Attachments

stUnless otherwise specified, the effective date is the date of service.

Attachment 1

Changes included in the July Update to the 2005 Medicare Physician Fee Schedule Database are as follows:

CPT/HCPCS ACTION

The following changes are contained in File A:

O066T PC/TC Indicator = 1

0066T –TC Short Descriptor: Ct colonography;screen

Procedure Status = N

WRVU = 0.00

Non-Facility PE RVU = 0.00 Facility PE RVU = 0.00 Malpractice RVU = 0.00

PC/TC = 1

Site of Service = 1 Global Surgery = XXX

Multiple Procedure Indicator = 0 Bilateral Surgery Indicator = 0 Assistant at Surgery Indicator = 0

Co-Surgery Indicator = 0 Team Surgery Indicator = 0 Diagnostic Indicator = 9

0066T – 26 Short Descriptor: Ct colonography; screen

Procedure Status = N

WRVU = 0.00

Non-Facility PE RVU = 0.00 Facility PE RVU = 0.00 Malpractice RVU = 0.00

PC/TC = 1

Site of Service = 1 Global Surgery = XXX

Multiple Procedure Indicator = 0 Bilateral Surgery Indicator = 0 Assistant at Surgery Indicator = 0

Co-Surgery Indicator = 0 Team Surgery Indicator = 0 Diagnostic Indicator = 9

0075T PC/TC Indicator = 1

0075T - TC Short Descriptor: Perg stent/chest vert art

Procedure Status = C

WRVU = 0.00

Non-Facility PE RVU = 0.00

Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 1

Site of Service = 1

Global Surgery = XXX

Multiple Procedure Indicator = 0

Bilateral Surgery Indicator = 0

Assistant at Surgery Indicator = 0

Co-Surgery Indicator = 0

Team Surgery Indicator = 0

Diagnostic Indicator = 9

0075T – 26 Short Descriptor: Perq stent/chest vert art

Procedure Status = C

WRVU = 0.00

Non-Facility PE RVU = 0.00

Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 1

Site of Service = 1

Global Surgery = XXX

Multiple Procedure Indicator = 0

Bilateral Surgery Indicator = 0

Assistant at Surgery Indicator = 0

Co-Surgery Indicator = 0

Team Surgery Indicator = 0

Diagnostic Indicator = 9

0076T PC/TC Indicator = 1

0076T – TC Short Descriptor: S&i stent/chest vert art

Procedure Status = C

WRVU = 0.00

Non-Facility PE RVU = 0.00

Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 1

Site of Service = 1

Global Surgery = XXX

Multiple Procedure Indicator = 0

Bilateral Surgery Indicator = 0

Assistant at Surgery Indicator = 0

Co-Surgery Indicator = 0

Team Surgery Indicator = 0

Diagnostic Indicator = 9

0076T – 26	Short Descriptor: S&i stent/chest vert art Procedure Status = C WRVU = 0.00 Non-Facility PE RVU = 0.00 Facility PE RVU = 0.00 Malpractice RVU = 0.00 PC/TC = 1 Site of Service = 1 Global Surgery = XXX Multiple Procedure Indicator = 0 Bilateral Surgery Indicator = 0 Assistant at Surgery Indicator = 0 Co-Surgery Indicator = 0 Team Surgery Indicator = 0 Diagnostic Indicator = 9
19120	Bilateral Surgery Indicator = 1
19125	Bilateral Surgery Indicator = 1
19290	Bilateral Surgery Indicator = 1
20690	Bilateral Surgery Indicator = 1
20926	Multiple Procedure Indicator = 0
29873	Multiple Procedure Indicator = 3 Endoscopic Base Code = 29870
32020	Bilateral Surgery Indicator = 1
36005	Bilateral Surgery Indicator = 1
50080	Bilateral Surgery Indicator = 1
50081	Bilateral Surgery Indicator = 1
50120	Bilateral Surgery Indicator = 1
50125	Bilateral Surgery Indicator = 1
50130	Bilateral Surgery Indicator = 1
50135	Bilateral Surgery Indicator = 1
50200	Bilateral Surgery Indicator = 1
50205	Bilateral Surgery Indicator = 1

50220	Bilateral Surgery Indicator = 1
50225	Bilateral Surgery Indicator = 1
50230	Bilateral Surgery Indicator = 1
60260	Bilateral Surgery Indicator = 1
64640	Bilateral Surgery Indicator = 1
67810	Bilateral Surgery Indicator = 1
67825	Bilateral Surgery Indicator = 1
67830	Bilateral Surgery Indicator = 1
67835	Bilateral Surgery Indicator = 1
67840	Bilateral Surgery Indicator = 1
67850	Bilateral Surgery Indicator = 1
67875	Bilateral Surgery Indicator = 1
67880	Bilateral Surgery Indicator = 1
67882	Bilateral Surgery Indicator = 1
67900	Bilateral Surgery Indicator = 1
67930	Bilateral Surgery Indicator = 1
67935	Bilateral Surgery Indicator = 1
67938	Bilateral Surgery Indicator = 1
73700	Bilateral Surgery Indicator = 3
73700 - 26	Bilateral Surgery Indicator = 3
73700 - TC	Bilateral Surgery Indicator = 3
73701	Bilateral Surgery Indicator = 3
73701 – 26	Bilateral Surgery Indicator = 3
73701 - TC	Bilateral Surgery Indicator = 3

73702	Bilateral Surgery Indicator = 3
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73702 - 26 Bilateral Surgery Indicator = 3

73702 - TC Bilateral Surgery Indicator = 3

95990 PC/TC Indicator = 5

G0365 - TC Diagnostic Indicator = 01

G0375 Long Descriptor: Smoking and tobacco use cessation counseling

visit; intermediate, greater than 3 minutes up to 10 minutes

Short Descriptor: Smoke/Tobacco counseling 3-10

Procedure Status = A

WRVU = 0.24

Non-Facility PE RVU = 0.09 Facility PE RVU = 0.09 Malpractice RVU = 0.01

PC/TC = 0

Site of Service = 1 Global Surgery = XXX

Multiple Procedure Indicator = 0 Bilateral Surgery Indicator = 0 Assistant at Surgery Indicator = 0

Co-Surgery Indicator = 0 Team Surgery Indicator = 0 Diagnostic Indicator = 9 Type of Service = 9

Note: Effective for services performed on or after March 22, 2005

G0376 Long Descriptor: Smoking and tobacco use cessation counseling

visit; intensive, greater than 10 minutes

Short Descriptor: Smoke/Tobacco counseling > 10

Procedure Status = A

WRVU = 0.48

Non-Facility PE RVU = 0.18 Facility PE RVU = 0.17 Malpractice RVU = 0.01

PC/TC = 0

Site of Service = 1

Global Surgery = XXX

Multiple Procedure Indicator = 0 Bilateral Surgery Indicator = 0

Assistant at Surgery Indicator = 0

Co-Surgery Indicator = 0 Team Surgery Indicator = 0 Diagnostic Indicator = 9 Type of Service = 9

Note: Effective for services performed on or after March 22, 2005

The following codes are contained in File B:

A4643 Procedure Status = I

Note: Effective for services performed on or after April 1, 2005

A4644 Procedure Status = I

Note: Effective for services performed on or after April 1, 2005

A4645 Procedure Status = I

Note: Effective for services performed on or after April 1, 2005

A4646 Procedure Status = I

Note: Effective for services performed on or after April 1, 2005

A4647 Procedure Status = I

Note: Effective for services performed on or after April 1, 2005

J1563 Procedure Status = I

Note: Effective for services performed on or after April 1, 2005

J1564 Procedure Status = I

Note: Effective for services performed on or after April 1, 2005

Q9941 Long Descriptor: INJECTION, IMMUNE GLOBULIN,

INTRAVENOUS, LYOPHILIZED, 1G

Short Descriptor: IVIG lyophil 1G

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00 Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9 Global Surgery = XXX

Multiple Procedure Indicator = 9 Bilateral Surgery Indicator = 9 Assistant at Surgery Indicator = 9

Co-Surgery Indicator = 9 Team Surgery Indicator = 9 Diagnostic Indicator = 9

Type of Service = 1

Note: Effective for services performed on or after April 1, 2005

Q9942 Long Descriptor: INJECTION, IMMUNE GLOBULIN,

INTRAVENOUS, LYOPHILIZED, 10 MG

Short Descriptor: IVIG lyophil 10 MG

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00 Facility PE RVU = 0.00 Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9 Global Surgery = XXX

Multiple Procedure Indicator = 9 Bilateral Surgery Indicator = 9 Assistant at Surgery Indicator = 9

Co-Surgery Indicator = 9 Team Surgery Indicator = 9 Diagnostic Indicator = 9 Type of Service = 1

Note: Effective for services performed on or after April 1, 2005

Q9943 Long Descriptor: INJECTION, IMMUNE GLOBULIN,

INTRAVENOUS, NON-LYOPHILIZED, 1G

Short Descriptor: IVIG non-lyophil 1G

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00

Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9

Global Surgery = XXX

Multiple Procedure Indicator = 9

Bilateral Surgery Indicator = 9

Assistant at Surgery Indicator = 9

Co-Surgery Indicator = 9

Team Surgery Indicator = 9

Diagnostic Indicator = 9

Type of Service = 1

Note: Effective for services performed on or after April 1, 2005

Q9944 Long Descriptor: INJECTION, IMMUNE GLOBULIN, INTRAVENOUS, NON-LYOPHILIZED, 10 MG

Short Descriptor: IVIG non-lyophil 10 MG

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00 Facility PE RVU = 0.00 Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9

Global Surgery = XXX

Multiple Procedure Indicator = 9 Bilateral Surgery Indicator = 9 Assistant at Surgery Indicator = 9

Co-Surgery Indicator = 9 Team Surgery Indicator = 9 Diagnostic Indicator = 9 Type of Service = 1

Note: Effective for services performed on or after April 1, 2005

Q9945 Long Descriptor: Low osmolar contrast material, up to 149 mg/ml

iodine concentration, per ml

Short Descriptor: LOCM <=149mg/ml iodine, 1ml

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00 Facility PE RVU = 0.00 Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9

Global Surgery = XXX

Multiple Procedure Indicator = 9 Bilateral Surgery Indicator = 9 Assistant at Surgery Indicator = 9

Co-Surgery Indicator = 9 Team Surgery Indicator = 9 Diagnostic Indicator = 9

Type of Service = 4

Note: Effective for services performed on or after April 1, 2005

Q9946 Long Descriptor: Low osmolar contrast material, 150 - 199 mg/ml

iodine concentration, per ml

Short Descriptor: LOCM 150-199mg/ml iodine,1ml

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00

Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9

Global Surgery = XXX

Multiple Procedure Indicator = 9

Bilateral Surgery Indicator = 9

Assistant at Surgery Indicator = 9

Co-Surgery Indicator = 9

Team Surgery Indicator = 9

Diagnostic Indicator = 9

Type of Service = 4

Note: Effective for services performed on or after April 1, 2005

Q9947 Long Descriptor: Low osmolar contrast material, 200 - 249 mg/ml

iodine concentration, per ml

Short Descriptor: LOCM 200-249mg/ml iodine,1ml

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00

Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9

Global Surgery = XXX

Multiple Procedure Indicator = 9

Bilateral Surgery Indicator = 9

Assistant at Surgery Indicator = 9

Co-Surgery Indicator = 9

Team Surgery Indicator = 9

Diagnostic Indicator = 9

Type of Service = 4

Note: Effective for services performed on or after April 1, 2005

Q9948 Long Descriptor: Low osmolar contrast material, 250 - 299 mg/ml

iodine concentration, per ml

Short Descriptor: LOCM 250-299mg/ml/iodine,1ml

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00

Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9

Global Surgery = XXX

Multiple Procedure Indicator = 9 Bilateral Surgery Indicator = 9

Assistant at Surgery Indicator = 9

Co-Surgery Indicator = 9

Team Surgery Indicator = 9

Diagnostic Indicator = 9

Type of Service = 4

Note: Effective for services performed on or after April 1, 2005

Q9949 Long Descriptor: Low osmolar contrast material, 300 - 349 mg/ml

iodine concentration, per ml

Short Descriptor: LOCM 300-349mg/ml iodine,1ml

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00

Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9

Global Surgery = XXX

Multiple Procedure Indicator = 9

Bilateral Surgery Indicator = 9

Assistant at Surgery Indicator = 9

Co-Surgery Indicator = 9

Team Surgery Indicator = 9

Diagnostic Indicator = 9

Type of Service = 4

Note: Effective for services performed on or after April 1, 2005

Q9950 Long Descriptor: Low osmolar contrast material, 350 - 399 mg/ml

iodine concentration, per ml

Short Descriptor: LOCM 350-399mg/ml iodine,1ml

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00

Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9

Global Surgery = XXX

Multiple Procedure Indicator = 9
Bilateral Surgery Indicator = 9
Assistant at Surgery Indicator = 9
Co-Surgery Indicator = 9
Team Surgery Indicator = 9
Diagnostic Indicator = 9
Type of Service = 4

Note: Effective for services performed on or after April 1, 2005

Q9951 Long Descriptor: Low osmolar contrast material, 400 or greater

mg/ml iodine concentration, per ml

Short Descriptor: LOCM >=400 mg/ml iodine,1ml

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00

Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9

Global Surgery = XXX

Multiple Procedure Indicator = 9

Bilateral Surgery Indicator = 9

Assistant at Surgery Indicator = 9

Co-Surgery Indicator = 9

Team Surgery Indicator = 9

Diagnostic Indicator = 9

Type of Service = 4

Note: Effective for services performed on or after April 1, 2005

Q9952 Long Descriptor: Injection, gadolinium-based magnetic resonance

contrast agent, per ml

Short Descriptor: Inj Gad-base MR contrast, ml

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00

Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9

Global Surgery = XXX

Multiple Procedure Indicator = 9

Bilateral Surgery Indicator = 9

Assistant at Surgery Indicator = 9

Co-Surgery Indicator = 9

Team Surgery Indicator = 9 Diagnostic Indicator = 9 Type of Service = 4

Note: Effective for services performed on or after April 1, 2005

Q9953 Long Descriptor: Injection, iron-based magnetic resonance

contrast agent, per ml

Short Descriptor: Inj Fe-based MR contrast, ml

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00

Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9

Global Surgery = XXX

Multiple Procedure Indicator = 9

Bilateral Surgery Indicator = 9

Assistant at Surgery Indicator = 9

Co-Surgery Indicator = 9

Team Surgery Indicator = 9

Diagnostic Indicator = 9

Type of Service = 4

Note: Effective for services performed on or after April 1, 2005

Q9954 Long Descriptor: Oral magnetic resonance contrast agent, per 100

ml

Short Descriptor: Oral MR contrast, 100 ml

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00

Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9

Global Surgery = XXX

Multiple Procedure Indicator = 9

Bilateral Surgery Indicator = 9

Assistant at Surgery Indicator = 9

Co-Surgery Indicator = 9

Team Surgery Indicator = 9

Diagnostic Indicator = 9

Type of Service = 4

Note: Effective for services performed on or after April 1, 2005

Q9955 Long Descriptor: Injection, perflexane lipid microspheres, per ml

Short Descriptor: Inj perflexane lip micros, ml

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00

Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9

Global Surgery = XXX

Multiple Procedure Indicator = 9

Bilateral Surgery Indicator = 9

Assistant at Surgery Indicator = 9

Co-Surgery Indicator = 9

Team Surgery Indicator = 9

Diagnostic Indicator = 9

Type of Service = 4

Note: Effective for services performed on or after April 1, 2005

Q9956 Long Descriptor: Injection, octafluoropropane microspheres, per ml

Short Descriptor: Inj octafluoropropane mic,ml

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00

Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9

Global Surgery = XXX

Multiple Procedure Indicator = 9

Bilateral Surgery Indicator = 9

Assistant at Surgery Indicator = 9

Co-Surgery Indicator = 9

Team Surgery Indicator = 9

Diagnostic Indicator = 9

Type of Service = 4

Note: Effective for services performed on or after April 1, 2005

Q9957 Long Descriptor: Injection, perflutren lipid mocrospheres, per ml

Short Descriptor: Inj perflutren lip micros, ml

Procedure Status = E

WRVU = 0.00

Non-Facility PE RVU = 0.00 Facility PE RVU = 0.00

Malpractice RVU = 0.00

PC/TC = 9

Site of Service = 9

Global Surgery = XXX

Multiple Procedure Indicator = 9 Bilateral Surgery Indicator = 9

Assistant at Surgery Indicator = 9

Co-Surgery Indicator = 9 Team Surgery Indicator = 9

Diagnostic Indicator = 9

Type of Service = 4

Note: Effective for services performed on or after April 1, 2005

The following codes are non-covered under the Medicare Physician Fee Schedule. Values for these codes have been established as a courtesy to the general public. These codes will remain non-covered even though relative value units have been established. These changes do not apply to the carriers and no systems changes are necessary.

97810	Work $RVU = 0.60$
9/010	WOLK KYU = 0.0

Non-Facility PE RVU = 0.38 Facility PE RVU = 0.23 Malpractice RVU = 0.03

97811 Work RVU = 0.50

Non-Facility PE RVU = 0.25 Facility PE RVU = 0.19 Malpractice RVU = 0.03

97813 Work RVU = 0.65

Non-Facility PE RVU = 0.40 Facility PE RVU = 0.25 Malpractice RVU = 0.03

97814 Work RVU = 0.55

Non-Facility PE RVU = 0.30 Facility PE RVU = 0.21 Malpractice RVU = 0.03

Attachment 2 Filenames for Revised Payment Files

The filenames for the July Update to the 2005 Medicare Physician Fee Schedule Database for carriers are:

File A – Contains changes effective January 1, 2005 and Smoking Cessation codes (G0375 & G0376)

MU00.@BF12390.MPFS.CY05.UP2A.C00000.V0511

File B – Contains changes effective after January 1, 2005 MU00.@BF12390.MPFS.CY05.UP2B.C00000.V0511

Purchased Diagnostic File MU00.@BF12390.MPFS.CY05.UP2.PURDIAG.V0511

The filenames for the July Update to the 2005 Medicare Physician Fee Schedule Database for intermediaries are:

SNF Abstract File MU00.@BF12390.MPFS.CY05.UP2.SNF.V0511.FI

Therapy/CORF Abstract File MU00.@BF12390.MPFS.CY05.UP2.ABSTR.V0511.FI

Therapy/CORF Supplemental File: MU00.@BF12390.MPFS.CY05.UP2.SUPL.V0511.FI

Mammography Abstract File MU00.@BF12390.MPFS.CY05.UP2.MAMMO.V0511.FI

Hospice File MU00.@BF12390.MPFS.CY05.UP2.ALL.V0511.RHHI